

6c. Gross Annual Income (in `) [Please (✓)]									
First Applicant		☐ Below 1 Lac	☐ 1-5 Lacs	☐ 5-10 Lacs	☐ 10-25 Lacs	☐ > 25 Lacs - 1 Crore	☐ > 1 Crore (or)		
		☐ Net-worth (Mandatory for non-individuals)				as on		D D M M Y Y Y Y (Not older than one year)	
Second Applicant		☐ Below 1 Lac	☐ 1-5 Lacs	☐ 5-10 Lacs	☐ 10-25 Lacs	☐ > 25 Lacs - 1 Crore	☐ > 1 Crore (or)	Net-worth	
Third Applicant		☐ Below 1 Lac	☐ 1-5 Lacs	☐ 5-10 Lacs	☐ 10-25 Lacs	☐ > 25 Lacs - 1 Crore	☐ > 1 Crore (or)	Net-worth	
6d. First Applicant:									
For Individuals [Please (✓)] Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee/Whole time Directors)						☐ I am PEP	☐ I am related to PEP	☐ Not Applicable	
For Non-Individuals providing any of the below mentioned services [Please (✓)]									
☐ Foreign Exchange/Money Changer Services Gaming/Gambling/Lottery/Casino Services Money Lending/Pawning None of the above									
Second Applicant: (To be filled only if the applicant is an individual)						☐ I am PEP	☐ I am related to PEP	☐ Not Applicable	
Third Applicant: (To be filled only if the applicant is an individual)						☐ I am PEP	☐ I am related to PEP	☐ Not Applicable	

7. FATCA & CRS INFORMATION (FOR INDIVIDUAL INCLUDING SOLE PROPRIETOR) (SELF CERTIFICATION) (REFER INSTRUCTION 18)

The below information is required for all applicant(s)/ guardian

Address Type: ☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office (for address mentioned in form/existing address appearing in Folio)

Is the applicant(s)/ guardian's Country of Birth / Citizenship / Nationality / Tax Residency other than India? ☐ Yes ☐ No

If Yes, please provide the following information [mandatory]

Please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below.

Category	First Applicant (including Minor)	Second Applicant/ Guardian	Third Applicant
Place/ City of Birth			
Country of Birth			
Country of Tax Residency#			
Tax Payer Ref. ID No^			
Identification Type [TIN or other, please specify]			
Country of Tax Residency			
Tax Payer Ref. ID No.			
Identification Type [TIN or other, please specify]			
Country of Tax Residency			
Tax Payer Ref. ID No.			
Identification Type [TIN or other, please specify]			

#To also include USA, where the individual is a citizen/ green card holder of USA. ^In case Tax Identification Number is not available, kindly provide its functional equivalent.

8. POWER OF ATTORNEY (PoA) HOLDER DETAILS

[illegible]

Please attach Proof. Refer instruction No 16, 17 & 18

9. DEMAT ACCOUNT DETAILS

I would like units to be allotted in DEMAT mode as per the details below:

Beneficiary Owner Identification Number (BO ID)														Depository Participant (DP) Name									
DP ID No.							Client ID No.							☐ NSDL					☐ CDSL				

Enclosures for Demat option		Client Master List (CML)	Transaction cum Holding Statement	Delivery Instruction Slip (DIS)
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10. BANK ACCOUNT DETAILS (Please note that as per SEBI regulations, it is mandatory for investors to provide their bank account details) (Refer Instruction 4)

Name of the Bank																			
Branch Address																			
City																Pin Code			
Account No.																			
Account Type Please tick(✓) ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others (please specify)																			

MICR Code										This is a 9 digit number next to your cheque number. Please attach a blank extra cheque cancelled or a clear photocopy of a cheque
IFSC Code										It is the responsibility of the investor to ensure the correctness of the IFSC code of the recipient /destination branch corresponding to the bank details mentioned in Section 10.

11. INVESTMENT DETAILS - (Refer Instruction 5)

17. INVESTMENT DETAILS (Refer instruction 5)	Scheme 1	Scheme 2	Scheme 3
Name of the Scheme	Taurus -	Taurus -	Taurus -
Plan			
Option			

Cheque No.	Amount	Scheme/Plan/Option

Investment Type (Please (✓))

☐ ONE TIME PURCHASE☐ SIP/Opti SIP PURCHASE (Please fill up SIP auto debit or PDC form and attach with this form)

Collection Centre / AMC Stamp / Signature

12. PAYMENT DETAILS (Refer Instruction No. 6)																													
		Scheme 1	Scheme 2	Scheme 3																									
Cheque / DD / RTGS / UMR No. & Date:																													
Bank & Branch Name																													
Amount in figures ` (i)																													
DD Charges if any, in figures ` (ii)																													
Net Amount (i)+(ii)	in figures `																												
	in words `																												
Account Type Please tick(✓) ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others (please specify) *** Refer Instruction 4 (Mandatory for Credit via NEFT / RTGS) (11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your bank)																													
13. NOMINATION DETAILS - Mandatory if mode of holding is single (Refer Instruction 14)																													
☐ I/We wish to nominate ☐ I/We DO NOT wish to nominate																													
Please Sign here Please Sign here Please Sign here First / Sole Applicant/ Guardian / POA Holder / Auth. Sign Second Applicant / Auth. Sign Third Applicant Sign <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 30%;">Nominee Name & Address</th> <th style="width: 25%;">Guardian Name & Address (In case Nominee is Minor)</th> <th style="width: 15%;">Nominee Relationship with 1st Holder</th> <th style="width: 15%;">Allocation (Total = 100%)</th> <th style="width: 10%;">Nominee / Guardian Signature</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Nominee 1</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">Nominee 2</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">Nominee 3</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>							Nominee Name & Address	Guardian Name & Address (In case Nominee is Minor)	Nominee Relationship with 1st Holder	Allocation (Total = 100%)	Nominee / Guardian Signature	Nominee 1						Nominee 2						Nominee 3					
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Nominee 2																													
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14. DOCUMENTS ENCLOSED (PLEASE ✓)																													
☐ Memorandum & Articles of Association ☐ Resolution / Authorisation to invest ☐ Power of Attorney ☐ List of Authorised Signatories with Specimen Signature(s) ☐ Trust Deed ☐ PAN Copy ☐ Certificate of Incorporation ☐ Bye-Laws ☐ KYC acknowledgement ☐ LLP Agreement ☐ Partnership Deed ☐ HUF Deed ☐ Beneficiary ownership list ☐ SIP Enrolment Form (For Investment through PDC) ☐ SIP Enrolment Form (For Investment through NACH / Auto Debit) ☐ SWP/STP/DSO Enrolment Form ☐ Third Party Payment Declaration Form ☐ Multiple Bank Account Registration Form																													
15. DECLARATION(S) & SIGNATURE(S) (Refer Instruction 15)																													
To, The Trustee, Taurus Mutual Fund Having read and understood the contents of the Scheme Information Document (SID), Statement of Additional Information (SAI) & Key Information Memorandum (KIM) I/We hereby apply for units of the scheme and agree to abide by the terms, conditions, rules and regulations governing the scheme. I/We hereby declare that the amount invested in the scheme is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Prevention of Money Laundering Act, Prevention of Corruption Act and / or any other applicable laws enacted by the government of India from time to time. I/We have understood the details of the scheme & I/we have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. <u>Applicable for NRI's only</u> - I/We confirm that I am/we are Non Residents of Indian Nationality/Origin and that I/we have remitted funds from abroad through approved banking channels or from funds in my/our Non-Resident External/Non-Resident Ordinary/FCNR account. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I/We confirm that details provided by me/us are true and correct. **I agree to receive all communication i.e. Statement of Account (SOA), Portfolio, Annual / Abridged Reports etc. (including regulatory updates) related to my investment via email. I may voluntarily subscribe to the on-line access for transacting through the internet facility provided by Taurus Mutual Fund and confirm of having read, understood and agree to abide by the terms and conditions for availing of the internet facility more particularly mentioned on the website www.taurusmutualfund.com and hereby undertake to be bound by the same. I further undertake to discharge the obligations cast on me and shall not at any time deny or repudiate the on-line transactions effected by me and I shall be solely liable for all the costs and consequences thereof. I/We confirm ☐ A resident of US/Canada ☐ Not a resident of US/Canada Opt-in (Select this box in order to receive the physical copy of the schemewise Annual / Abridged Report at the end of financial year) ☐																													